L	Substitute for Form PTO-875										09/653.486		
. CLAIMS AS FILED - PART I Page 2 OTHER TIME													
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	CLAIMS AS AMENDED - PART II								<u> </u>	, o	IUIAI	<u>. </u>	
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AMENDMENT A	AM		MANING AFTER ENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT		ዓለነ 6	ADDI- TIONAL FEE		MIC	ADDI TIONAL FEE	
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	·							TOTAL ADD'T FEE		OII	TOTAL ADD'L CEL		
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\frac{1}{2}	FIRST PRESENTATION OF AUG TIPLE DEPENDENT CLAM (3) CFR 1 160)							1		OF	• 3	•	
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	# 4 the pritry in column 1 is less than the entry in column 2, write "0" in column 3. If the Thighest Number Provincisty Paid For the THIS SPACE is less than 20, enter 20. # the Thighest Number Provincisty Paid For the THIS SPACE is less than 3, enter 3.												

(I may be independent) is the highest number found in the appropriate time in column to

The Triples (Commissioner Consistency Pad For Clinia to Independent) is the highest number found in the appropriate has an evidency contains to the content of it independent in the entermination of the content of the

High inema assistance in completing the folias, can 1,800-010-0199 and solect option (